U.S. Department of Health and Human Services

HRSA

Health Center Program

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About Health Centers

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What is a Health Center?

Health centers provide high quality preventive and primary health care to patients regardless of their ability to pay. Approximately one in 15 people in the U.S. relies on a HRSA-funded health center for medical care.

Nearly 1,300 health centers operate more than 9,000 service delivery sites in every U.S. state, D.C., Puerto Rico, the Virgin Islands and the Pacific Basin care for nearly 22 million patients. For millions of Americans, including some of the most vulnerable individuals and families, health centers are the essential medical home where they find services that promote health, diagnose and treat disease and disability and help them cope with environmental challenges that put them at risk.

Since the passage of the Affordable Care Act in 2010, health centers have become even more important to the nation's health care system and have increased their number of patients served by nearly 5 million while adding more than 43,000 new full-time staff nationwide.

How Health Centers Work

Health centers are public and private non-profit health care organizations that comply with Federal requirements to

- Serve a medically underserved population,
- Provide appropriate and necessary services with fees adjusted on patients' ability to pay,
- Demonstrate sound clinical and financial management, and
- Be governed by a board, most of whose members are being served by the health center.

Most of these health centers apply for and receive Health Center Program grant funding that, on average, constitutes about 20 percent of their operating revenue. The remainder comes from Medicaid, Medicare, private insurance, patient fees and other resources.

Nearly 100 health centers meet all health center program requirements, but do not receive health center grant funding. These are called Health Center Program look-alikes.

Quality of Care

Health center quality of care equals and often surpasses that provided by other primary care providers. Overall, health centers emphasize coordinated primary and preventive services or a "medical home" that promotes reductions in health disparities for low-income individuals, racial and ethnic minorities, rural communities and other underserved populations. Close to 60 percent have been designated patient centered medical homes, which means they emphasize care coordination and communication to improve quality, lower costs and enhance both the patient and provider experience.

Health centers improve patient outcomes while reducing health disparities, despite serving a population that is often sicker and more at risk than the general population. They also reduce costs to health systems; the health center model of care has been shown to reduce the use of costlier providers of care, such as emergency departments and hospitals.

Health centers place emphasis on the coordination and comprehensiveness of care, the ability to manage patients with multiple health care needs, and the use of key quality improvement practices, including health information technology. Nearly 90 percent of health centers have electronic health records installed at all sites and being used by all providers.

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